

U.S. DEPARTMENT OF ENERGY  
WESTEREN AREA POWER ADMINISTRATION  
**ACH PAYMENT ENROLLMENT FORM**

This form is used for Automated Clearing House (ACH) payments with an addendum record that contains payment-related information processed through the Vendor Express Program. Recipients of these payments should bring this information to the attention of their financial institution when presenting this form for completion.

**PRIVACY ACT STATEMENT**

The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). All information collected on this form is required under the provision of 31 U.S.C. 3322 and 31 CFR 210. This information will be used by the Treasury Department to transmit payment data by electronic means to vendor's financial institution. Failure to provide the requested information may delay or prevent the receipt of payments through the Automated Clearing House Payment System.

**AGENCY INFORMATION**

FEDERAL PROGRAM AGENCY:

Western Area Power Administration

AGENCY IDENTIFIER:  
WAPA

AGENCY LOCATION CODE: (ALC)  
89001602

ACH FORMAT:  
CCD+

ADDRESS:

P. O. Box 281213

Lakewood, CO 80228-8213

CONTACT:

Fiscal Accounting, A8210

TELEPHONE NUMBER:

(720) 962-7521

VENDOR NO.:

ADDITIONAL INFORMATION:

FACSIMILE NUMBER:

(720) 962-7459

**PAYEE/COMPANY INFORMATION**

NAME:

FED TAXPAYER ID OR SSN NO.: (9 DIGITS)

ADDRESS:

CONTACT PERSON: (NAME, TITLE, AND SIGNATURE)

TELEPHONE NUMBER:

( )

**FINANCIAL INSTITUTION INFORMATION**

NAME:

ADDRESS:

ACH COORDINATOR NAME:

TELEPHONE NUMBER:

( )

NINE-DIGIT ROUTING TRANSIT NUMBER: (ABA)

DEPOSITOR ACCOUNT TITLE:

DEPOSITOR ACCOUNT NUMBER:

TYPE OF ACCOUNT:

☐ CHECKING

☐ SAVINGS

SIGNATURE AND TITLE OF AUTHORIZED OFFICIAL:  
(Could be the same as ACH Coordinator)

TELEPHONE NUMBER:

( )

☐ AGENCY COPY

☐ PAYEE COMPANY COPY

☐ FINANCIAL INSTITUTION COPY